

Michigan
Department
of Human
Services

Prepared by the
DHS Office of
Communications
(517) 373-7394

Articles in Today's Clips

Friday, May 5, 2006

(Be sure to maximize your screen to read your clips)

TOPIC	PAGE
DHS budget*	2-5
Informational picket*	6
Sex offender registry	7-8
Day care	9-11
Child abuse-neglect/welfare	12-15
Child support	16
Child development	17
Health care	18-29
Unger case	30-31
Juvenile home	32

DHS budget reflects GOP welfare reforms

Gongwer News Service

May 4 ,2006

Under a House subcommittee budget approved Thursday, the Department of Human Services would see \$45 million in decreased funding compared to the governor's executive recommendation for the upcoming fiscal year, which mainly reflects savings in programs that would occur under Republican-backed changes in welfare assistance.

The largest amount of assumed savings to the \$4.4 billion budget, HB 5783, (\$1.1 billion in general funds) comes from the 48-month lifetime limit, which is estimated to save approximately \$17.2 million in both general funds and federal dollars.

Consolidation of payment standards for the Family Independence Program to Shelter Area IV levels would save an additional \$12.5 million in both general funds and federal dollars. The \$200 earned income base for FIP cases not meeting federal work requirements would be eliminated, for a savings of \$9.6 million in general funds.

Further changes that would establish a 90-day sanction for the first violation of policy, followed by a one-year sanction for the third offense and lifetime expulsion from the program for the fourth violation would also save an estimated \$7.5 million, all in general funds.

Accelerating of the administration's Jobs, Education and Training program (JET) to a statewide campaign, along with federal Supplemental Security Income advocacy would produce a savings of \$1.7 million in general funds and \$4.3 million in federal funding. State disability assistance for SSI advocacy would also save \$1.5 million, all in general funds.

The plan also calls for a cap on FIP benefits to recipient groups who add a new child beyond the third child, for a savings of \$1.5 million, all in general funds.

The state would implement a \$25 per-month bonus for up to a year for people who become employed, costing \$3.4 million in federal dollars. The state would also contract out legal services for SSI advocacy and add 80 specialized staff positions to administer the recently dubbed Express JET program for a cost of \$3.3 million in general funds and about \$4 million in federal dollars.

The Work First program would receive \$12.5 million for additional employment and training services (all federal funds) and employers of FIP recipients would receive \$3.6 million (all general funds) for training grants.

And while the governor called for 51 new DHS caseworkers in her budget recommendation, the House Appropriations Human Services Subcommittee approved the hiring of 25 new child protective services staff and additional technology funding upgrades at a cost of \$2.1 million (\$1.5 million in general funds).

Rep. Jerry Kooiman (R-Grand Rapids), who has led for reforms in the House, said the changes would only affect able-bodied adults in an effort to meet federal work requirements and move more people to self-sufficiency.

States that have been successful in moving people off the welfare system have implemented time limits to cash assistance and tougher sanctions. The “clock would stop” when the state’s unemployment rate was high, Mr. Kooiman said, adding that if it was implemented today much of the state would be exempt.

And while the governor’s proposal has been a step in the right direction, Mr. Kooiman said it does not go far enough or fast enough.

“We continue to believe the state of Michigan has to do a much better job and a much better assessment of individuals,” he said.

Rep. Chris Kolb (D-Ann Arbor) said he respected the fact that discussions are ongoing on the topic of reforms, but added the Republican-led plan would decrease benefits for some and would ultimately not lead to people escaping the cycle of poverty, but instead force people out of the program using arbitrary sanctions and time lines.

Mr. Kolb said the plan could mean an increased cost associated with more homeless shelters and other care facilities, and that in most of the cases, the children who are most vulnerable would suffer the most.

To his understanding, Mr. Kolb said the 48-month limit would be retroactive, which would affect 13,000 cases, which represent 36,000 children. The governor’s proposal will get the state at the level to meet federal guidelines, he said.

“Express JET is not JET,” he said. “It does not provide enough seats for all the passengers.”

In reporting the budget to the full committee, Mr. Kolb moved for amendments supported by absent member Rep. George Cushingberry (D-Detroit), who was out sick Thursday. Those amendments failed because of lack of Republican support, but would have daycare rate payments by 25 percent, provided a 33 percent increase to cash payments and added 200 more staffing positions.

Mr. Kooiman said those proposals would have cost an additional \$370 million.

The budget was passed on 4-1 votes, with Mr. Kolb dissenting.

Sharon Parks of the Michigan League for Human Services said the proposal is unduly harsh given the job atmosphere people in the state are facing and that it still does not recognize the barriers people have to getting work, which are mostly in low-skill and entry-level positions.

“Responsible policymakers simply do not choose the worst of times to shred the safety net,” she said.

House GOP Push Welfare Reforms In DHS Budget

MIRS, Thursday, May 4, 2006

Today, the House Appropriations Subcommittee on the Department of Human Services (DHS) reported out HB 5783, a \$4.42 billion (\$1.147 billion General Fund) DHS budget for Fiscal Year (FY) 2007, highlighted by House Republicans' welfare reform measures.

The budget would represent a \$45.6 million (\$43.5 million General Fund) savings compared to Gov. Jennifer **GRANHOLM**'s recommendations of earlier this year.

Under the House Republican plan, the projected \$74.6 million in cuts would come from welfare reforms, such as installing a 48-month limit (saving \$34 million) for able-bodied adult recipients, allowed for more spending in other areas of the budget.

Last week, the House Republicans announced that they were going to try once again to institute their welfare reform ideas (See "GOP Tries Again With Welfare Reform" 04/25/06).

Last year Granholm vetoed the House Republicans' plan arguing that it went too far by hurting recipients who follow the rules but still couldn't earn enough money to get out of poverty. It would appear that this year the same battle may be fought over again, only all the more intensely due to the upcoming election.

Rep. Chris **KOLB** (D-Ann Arbor), who had to carry the water for the administration on the subcommittee due to the illness of the other Democratic member, Rep. George **CUSHINGBERRY** (D-Detroit), said he hoped a compromise could be reached, but seemed to be more than a little skeptical.

"In some ways this is consistent with the governor's proposal," Kolb said. "But in many other ways the two plans take different paths. I believe the governor's proposal is better, it will get people off assistance not because of arbitrary limits, but by making them self sufficient.

"I believe we can reach agreement if we want to," Kolb added. "But not if we're just going to try to make political points."

However, Rep. Jerry **KOOIMAN** (R-Grand Rapids), the House Republican Caucus' top point man on the issue, continues to argue that Republicans are trying to implement welfare measures that most other states already have on the books.

"In discussions, the administration kept bringing up the state of Georgia," Kooiman said. "I'd like to point out that Georgia has the 48-month limit and tougher sanctions. The states that have been the most successful are those that have time limits and tougher sanctions."

In reply, Kolb said that the tougher sanctions and the limits (which include a 2-year consecutive month limit as well as the overall 48-month limit) would ultimately impact children.

"The 48-month limit would go into effect at the end of this year, so that would affect 13,000 recipients and about 39,000 children," Kolb said.

However, Kooiman disagreed and reiterated that the limit would affect "able-bodied" adults.

In addition, Kooiman said he agreed with Kolb that the budget is a "work in progress," and he echoed Kolb's desire that an agreement would ultimately be reached — but more along the lines of a situation where the administration would begin seeing that the Republicans had some sensible ideas.

Meanwhile, Rep. Bruce **CASWELL** (R-Hillsdale) argued for the tougher sanctions and time limits by stating that setting expectations lower can often be debilitating for individuals.

"The bigotry of low expectations is every bit as bad as any other kind of bigotry we have," Caswell said.

Sharon **PARKS**, spokesperson for the Michigan League for Human Services issued a statement today that claimed the House Republican welfare reforms are "not only unduly harsh, but completely irrational in light of Michigan's high unemployment rate and struggling economy."

"Now is not the time to weaken the safety net by moving families off cash assistance prematurely," Parks said. "Rather than using a time limit to determine that families no longer need cash assistance, it would make more sense to determine what barriers to gainful employment exist and to fully address those barriers."

Parks claims that under the proposals 39,000 children and 13,000 adults would be affected by the 48-month time-limit and an additional 15,000 children and 5,100 adults would be affected by the limit of 24 consecutive months.

Kolb offered three amendments he said reflected the wishes of Cushingberry — they included adding 200 positions, more funding for the Family First program, increasing the size of assistance payments and increasing day care funding by 25 percent.

None of the amendments were voted on because with Kolb as the only Democrat on the panel, there was no support for any of them.

Budget cuts motivate Monroe protests

By: Stephanie Ariganello

May 04. 2006 11:27AM

Monroe Evening News

Escalating workloads and limited resources drove some local workers to the sidewalks Wednesday.

In Monroe County, state parole and probations officers and human services workers took to the street at lunchtime to bring awareness to the situation. About 35 workers - members of Local 6000, United Auto Workers - gathered, holding signs in front of the offices at 29 Washington St. Across the state, several thousand employees joined the campaign. Alan Kilar, Local 6000 spokesman for the event, said Monroe had one of the largest groups.

"The goal was to educate the local communities," said Mr. Kilar.

"We're concerned that the safety net has holes and local people aren't getting the services they should be getting."

Mr. Kilar said probation/parole officers and human services workers often feel the sharp edge of budget cuts.

"An independent study of the state recently showed that we would need 350 more parole and probation workers just to handle the current caseload," he said. He attributed the study to the National Council on Crime and Delinquency, an independent agency.

The picketing follows highly publicized cases that show problems within the system, such as 27-year-old Patrick Selepak, who was on parole, and his girlfriend allegedly murdered a couple in their home. Mr. Kilar said many state workers continue to work off the clock, on weekends and after hours on unmanageable caseloads.



Evening News photo by CRAIG WATSON

Members of Local 6000, United Auto Workers, across the state held an informational picket Wednesday during their lunch hour. Employees at the Monroe County parole/probation office turned out in support. "Our goal is to let the public know how rising workloads and the lack of sufficient resources have now resulted in serious reductions in critical state services," said Sandra Parker, president.

405 arrested in sex registry violations

May 5, 2006

BY CHRIS CHRISTOFF

FREE PRESS LANSING BUREAU CHIEF

LANSING -- A 14-day sweep resulted in 405 arrests of people who didn't register properly with Michigan's sex offender registry, State Police said Thursday.

Officers from more than 100 police departments checked 2,884 residences across Michigan to find violators, State Police said.

An additional 585 warrants for sex offender list violations were requested. The sweep ended April 30.

It was the second such sweep led by the State Police to pick up convicted sex offenders who haven't kept their registrations or addresses up to date. A similar sweep in 2005 resulted in 846 arrests.

Among the 405 recent arrests, 58 were in Wayne, Oakland, Macomb and St. Clair counties.

Those counties accounted for almost half of the additional warrants issued.

The sweep targeted those who failed to change or verify their addresses for the sex offender registry by the April 15 deadline.

Those convicted of felony sex offenses must verify their addresses four times a year with their local police. Those convicted of misdemeanor sex offenses must verify their places of residence once a year.

Penalties for not complying with the sex registry ranged from a 93-day jail sentence to a 4-year felony.

All offenders must report changes of address within 10 days of moving.

Most of the warrants were for not verifying addresses; a few were for minor infractions such as not paying for or signing registration forms. Forty-two people were charged with additional crimes.

The registry was created to help the public determine whether convicted sex offenders live nearby. Critics say the registry stigmatizes even those convicted of lesser offenses, including teens who have had consensual sex with minors.

As of May 1, 38,936 people were listed on the state's registry.

"Compliance with the state's sex offender registry is not optional, it is the law, and we are prepared to enforce it," Michigan State Police Director Tadarial Sturdivant said.

To view the Michigan sex offender registry, go to www.mipsor.state.mi.us/

Contact **CHRIS CHRISTOFF** at 517-372-8660 or christoff@freepress.com.

Sex offender sweep nets 405 arrests statewide

5/4/2006, 10:06 a.m. ET

The Associated Press

LANSING, Mich. (AP) — Law enforcement officers arrested 405 people during a recent 14-day sweep of the state for violators of Michigan's sex offender registry law.

The effort also resulted in 585 additional arrest warrant requests, Michigan State Police said Thursday.

Officers primarily targeted felony offenders who failed to change or verify their addresses for the sex offender registry by an April 15 deadline.

The Sex Offenders Registration Act requires those convicted of a felony to verify their addresses at a local law enforcement agency four times a year. Penalties for not complying range from a 93-day misdemeanor to a four-year felony.

Offenders convicted of misdemeanors must verify their addresses once a year. People on the registry who move are required to report their new addresses within 10 days.

More than 110 law enforcement agencies and prosecutors' offices participated in the sweep. It was the second such effort — a 55-day sweep in 2005 resulted in 846 arrests.

"Law enforcement in Michigan is committed to ensuring the safety of our children and families by ensuring compliance with our state's sex offender laws," Michigan State Police Director Col. Tadarial Sturdivant said in a statement. "Compliance with the state's sex offender registry is not optional — it is the law, and we are prepared to enforce it."

There were 38,936 people listed on the state's sex offender registry as of this past Monday. Of those, 23,884 are required to report their addresses four times a year or once a year, depending on the offense.

On the Net:

Michigan State Police: <http://www.michigan.gov/msp>

Friday, May 05, 2006

Officials probe mysterious illnesses at day care

Symptoms among as many as 24 children at Brownstown center include nausea, diarrhea.

Joel Kurth and Santiago Esparza / The Detroit News

Michigan and Wayne County health officials are investigating the mysterious illnesses of at least nine and perhaps as many as two dozen youngsters at a Brownstown Township child care center. The children at Dawn to Dusk day care on Telegraph near Sibley began reporting flu-like symptoms, dizziness and other ailments on Sunday. County officials said six were treated at hospitals and three reported symptoms; an attorney for one family says as many as 24 children may have been sickened.

Even two children of the now-closed center's owner, Keta Washington-Bynum, have been ill.

"Their symptoms are quite varied," said Dr. Talat Danish, the county's director of epidemiology.

"Some have nausea and vomiting. Some have diarrhea. Some have drowsiness and high blood pressure.

"There is no common link or common thread. It is unusual and that's why we're doing a lot of testing."

Health officials have ordered a battery of environmental and health tests on children and the facility, Danish said. They could learn the first results as early as this weekend, said T.J.

Bucholz, a spokesman for the state Department of Community Health.

Some contend the problems have lingered for months.

Children began getting sick with flu-like symptoms since the day care opened in November, said Debra Pospiech, an attorney for the Hogan family of Taylor. Three Hogan boys have visited emergency rooms in the past few weeks and one remains at University of Michigan Medical Center.

Pospiech said a sewage backup caused a mess at the day care just before it was opened. It was cleaned, but children have been sickly since being there, she said. Gary Fields, an attorney for the day care's owners, said they were not at fault.

"If she (Washington-Bynum) would have thought there was a problem, would she have let her children in there?" Fields said.

Michael Moon, a spokesman for the county's Department of Public Health, said investigators have no knowledge of any sewer backup.

Children Hospitalized with Mysterious Daycare Illness

By Bill Proctor

Web produced by Christine Lasek

May 4, 2006

Two young children who got sick at daycare are back in the hospital. A mysterious illness spread through the building, and is having horrible affects on some of the children.

It has been reported that 23 children from the Dawn to Dusk daycare in Brownstown Township have fallen ill, and state investigators are trying to figure out what went wrong.

Of the 23 ill children, at least 6 have been treated and released from the hospital.

Just hours after their parents spoke with 7 Action News about the illness Wednesday, 2 of the children who had been treated and released were taken to the University of Michigan Hospital emergency room.

Now parents are worried that some of the other sick children may get worse.

Katrina Kneirim is the daycare manager, and her 14-month-old is among the children who have fallen ill. She explained, "Whenever he eats, and he eats between snacks and everything, he's just not right. He's not himself, it's not my baby."

Keta Washington-Bynum owns the Dawn to Dusk daycare, and she says that both of her children were hospitalized at Children's Hospital for several days with the mysterious illness.

Keta believes that a sewer backup, which occurred just before her business opened in November, may have left contaminants in the walls and carpet, and the recent warm days may have made the children more susceptible.

The parents of the sick children are not blaming Keta for the illness.

According to Kneirim, "She [Keta] made sure the daycare was

clean. Even when the kids started getting sick, she said, 'This daycare's not clean, it must be something in the daycare.' So we had to clean it every day."

Attorney Debra Pospiech represents one of the families with a sick child. "Our main concern is making sure that these children get long term healthcare for any illnesses that might result from the contamination they were exposed to."

Thus far, the contamination has not turned into a legal issue, pending a health report from the state.



Couple charged with leaving kids alone

By: Ray Kisonas

Monroe Evening News

May 04. 2006 11:57AM

A Temperance couple who allegedly left their young children home alone for several hours while they went to a bar to celebrate Valentine's Day have been charged with criminal misdemeanors.

Monroe County Prosecutor William P. Nichols issued child neglect warrants against Jody Bushroe, 34, and Dawn Bushroe, 35, of 2186 Four Meadows Dr.

The charges stem from a Feb. 18 incident when neighbors say they found the couple's 5-year-old boy wandering outside in his pajamas crying.

Monroe County sheriff's deputies arrived at the Bushroe house about 1 a.m. A neighbor told deputies they found the couple gone and the boy's 2-year-old brother standing at the top of the stairs inside the house crying, reports said.

Police reports said the older boy awoke and became scared. He wandered outside with temperatures around 15 degrees, a wind chill below zero and blowing snow. His cries awoke the neighbors.

While deputies were investigating, the Bushroes pulled into the driveway.

Mr. Bushroe was arrested that night on a drunken driving charge. He and his wife also have been charged with open intoxicants in a motor vehicle.

The children are with the parents. On the night they were left home alone, they were sent to their grandparents' house to spend the night after the police arrived.

Child neglect and open intoxicants in a motor vehicle carry penalties of 90 days in jail. Operating while impaired is a 93-day misdemeanor.

The couple is expected to be arraigned in First District Court. Their attorney did not return phone calls.

Child, family reunited

Friday, May 05, 2006

The Grand Rapids Press

BELDING --

A preschool student was dropped off at the wrong bus stop Thursday, but soon was reunited with his family. Superintendent Charles Barker said the child stayed on the bus an extra stop after a substitute driver didn't check to see where the student was to be dropped off. He said the stop was four blocks from the child's home, and that a parent of another student made sure the child got to the right place. Barker said the driver was reminded about the proper procedures for preschool students.

Parents agree to terminate rights

Friday, May 5, 2006

By John Tunison

Kalamazoo Gazette News Service

ALLEGAN -- The ongoing child sexual abuse in an Allegan-area home was something a mother and father could not have missed, prosecutors say.

The signs should have been obvious, especially with evidence that children from two families were sexually assaulted, beaten and sometimes locked in a basement with the lights off, according to prosecutors.

A 26-year-old man and his 25-year-old wife, who lived in the home for months, agreed this week to terminate their parental rights in Allegan County Family Court.

The couple have an 11-month-old daughter together, and the woman has an 8-year-old daughter and 6-year-old son with two other fathers.

Three men who also lived in the home -- a man, his 56-year-old father and a 73-year-old grandfather of the man who terminated his parental rights -- are charged with various sex-related crimes.

Police say two families lived in the home, and seven children, all 9 or younger, were abused over several months. Detectives discovered thousands of digital images of child pornography in the house.

Children living at the home told police they were forced to perform sex acts on each other and the father and son.

The parents in court Tuesday have not been charged in the case, but prosecutors said they failed to protect their children from fall 2005 to March.

Defense: Teen accused of shooting dad was in 'abusive situation'

Victim's family upset by lawyer's allegations

Friday, May 05, 2006

By ERIC ENGLISH

BAY CITY TIMES WRITER

HARRISVILLE - A 13-year-old charged with murdering his father in Alcona County was in an "abusive situation," the teenager's defense attorney said Thursday.

And family turmoil has only continued for the teen since he was placed with his mother and maternal grandmother to await trial, Harrisville attorney Laura Frawley said.

"This has been a catastrophic failure on the part of the family," Frawley argued during a hearing in Alcona County Probate Court.

But painting the teenager as a victim upset relatives of 46-year-old Mark A. Link, who was fatally shot Jan. 31 at his home in Curtis Township.

"What about my brother? He's dead," said Michael Link of Warren, after attending the court hearing with several family members on Thursday.

Link also disputed Frawley's claim that Mark Link abused his son.

"My brother yelled all the time, but he never laid a hand on him," Michael Link said.

Other family members said they still can't believe the teenager is facing an open murder charge in connection with Mark Link's death.

"I've known that kid since the day he was born and I never thought he would shoot anyone," said Christopher Link, 29, of Mikado, who said he is the teen's half-brother.

Christopher Link said he recalled going rabbit hunting with Mark Link and the teen just a few days before the shooting and they had a good time.

The teenager appeared relaxed in court Thursday, dressed in a T-shirt, blue jeans and sneakers. He was accompanied by his maternal grandmother. The Times is withholding his name since he is charged as a juvenile offender.

A pretrial hearing in probate court was adjourned until June 1. But Probate Judge James Cook was asked to consider a prosecution motion to return the teenager to a secure detention facility pending trial.

Alcona Assistant Prosecutor Brian Harger said since the grandmother assumed custody, there had been several police calls to the home over alleged incidents that jeopardized the teen's well being. Harger said the open murder charge involving a firearm also is grounds for putting the youth in secure detention.

"He would be safe and the community would be safe," Harger said.

Frawley said the police calls did point to a "chaotic environment," but it was caused by the actions of other family members.

Judge Cook said he would allow a new placement arrangement that allows the teen and his grandmother to live by themselves in an apartment in Harrisville pending trial. They are not allowed to receive visitors unless they have the court's permission.

Cook said that would allow the case to proceed in a timely manner and allow the teen to continue receiving therapy.

"If there was any question as to the safety of the community, I can assure you he would be placed in secure detention," Cook said.

- Eric English covers regional news for The Times. He can be reached at 1-800-727-7661 or by e-mail at eenglish@bc-times.com.

Rison loses NFL pension in child-support case

THE FLINT JOURNAL

May 05, 2006

By Ron Fonger

bmickle@flintjournal.com • 810.766.6317

GENESEE COUNTY - Former Pro Bowl receiver and Flint Northwestern star athlete Andre Rison has lost his NFL pension to pay for past-due child support in Michigan.

A court-appointed receiver said Thursday that he has won more than \$64,000 in pension funds to help pay down a child support debt here of about \$100,000 owed to ex-wife Tonja Rison of Southfield and their two children.

David Findling, the Royal Oak attorney appointed to recover Rison's assets in the county, provided a copy of the check from the NFL Players Second Career Savings Plan dated April 19.

"There have been a lot of ongoing things to try to recoup the money that is owed to Tonja Rison," Findling said.

"One of the ways we can do this is by taking someone's pension."

The Flint Journal could not immediately reach Rison's attorney, David A. Kallman of Lansing. Findling was assigned by the county's Probate Court to find Rison's assets in 2002, and for years the former NFL star and his representatives have claimed he did not have the money to pay child support debts here and in Georgia to Raycoa Handley, a Flint native who is the mother of two of Rison's other children.

Rison last played for the NFL's Oakland Raiders, but he starred for the Atlanta Falcons and in the Super Bowl for the Green Bay Packers as well.

He came back to play in the Canadian Football League's Toronto Argonauts before leaving football.

He has been jailed over criminal charges tied to his child support problems in Georgia and Michigan.

Findling said Rison has few if any remaining assets but is owed money by the Raiders.

"My powers are limited to property or assets in Michigan," he said, but "the NFL does business here," making the domestic relations order to tap the pension legitimate.

Randall Kessler, an attorney who represents Handley, said he expects to register orders in Michigan to secure some of the pension money for the \$50,000 owed in Georgia.

"Congratulations to the receiver for doing a good job," Kessler said. "He still owes a lot of money to us. There's definitely still a debt here."

Kessler said the last he was aware, Rison was trying to sign a contract with an arena football team.

Expert: Children vital to economic development

Dollars well spent on child development programs, expert says

Friday, May 05, 2006

BY LIZ COBBS

Ann Arbor News Staff Reporter

One of the best investments state and local governments can make with their public dollars is in high-quality, parent-involved early childhood development programs, an early education and economics expert told a local conference of educators Thursday.

Arthur J. Rolnick, senior vice president and director of research at the Federal Reserve Bank of Minneapolis, said governments, in hopes of job creation, conventionally promote economic development by spending billions of public dollars in subsidies to get private companies to either locate or expand their business.

From a national perspective, however, new jobs aren't created, Rolnick said, they simply move from one location to another.

"The conventional economic development in this country is seriously flawed," Rolnick said.

"Billions of public dollars are spent on job creation with zero public return. ... This is the wrong way to do economic development."

Rolnick made his remarks to a luncheon audience of about 400 as the guest speaker at the High/Scope Educational Research Foundation's 2006 International Conference at the Ypsilanti Marriott.

Economic research shows there's a high public return with investments in early childhood research, according to Rolnick, whose essay, "The Economics of Early Childhood Development" has brought him international attention.

Among the reports Rolnick reviewed during his research was High/Scope's highly acclaimed Perry Preschool Study that followed 3- and 4-year-old children at the Ypsilanti preschool over a 40-year period. The report showed that children involved in high-quality early education programs were more successful in life. The study also showed that society saved \$17 for every \$1 invested in the program, as a result of savings in welfare, the criminal justice system, special education and other social expenses.

Prior to Rolnick's speech, High/Scope President Larry Schweinhart, a researcher involved with the Perry Preschool study from its beginning, said it's become clear economics and business are political forces that can be harnessed to help support early childhood development programs.

Rolnick said it's not just enough to have a "great" early childhood development program. The program must have the ability to be replicated and must involve parents.

Rolnick said he's involved in a project in Minneapolis for at-risk children under age 5 and their families. Also involved, he said, are the CEOs of national retail companies such as Target and Best Buy.

The project involves raising \$30 million to establish a permanent "early learning" fund for at-risk children. The scholarship would pay for 3-year-olds to attend qualified early childhood development programs and pay for public health nurses to work as parent mentors and make regular home visits. Rolnick envisions a permanent endowment to be created so that every at-risk child in the state of Minnesota could attend an early childhood development program. The endowment would continue funding tuition scholarships, parent mentoring and more.

"You can't just do this for one or two years, you have to make it a permanent commitment," he said.

In addition to Rolnick, featured conference speakers included Sarah Green, president and CEO of the National Head Start Association and Ivan Galindo, co-founder of InstitutoHigh/Scope Mexico. The conference ends today.

Liz Cobbs can be reached at lcobbs@annarbornews.com or 734-994-6810.

Michigan business

Workers reject pricey health plans

May 5, 2006

BY KATIE MERX

FREE PRESS BUSINESS WRITER

An increasing number of Michigan workers decline their employer's health insurance because it's too expensive, a report released Thursday by the Robert Wood Johnson Foundation shows. The report, "Shifting Ground: Changes in Employer-Sponsored Health Insurance," looked at how many employed people had access to health coverage and how many took advantage of it between 1998 and 2003.

In the 5-year period studied, the average total premium for an individual employee increased 49.21% in Michigan and 41.87% nationwide.

Coinciding with that increase in cost, the percentage of employees enrolled in health insurance at businesses that offer it dropped 6.6% in Michigan and 3.2% nationwide.

"Over that 5-year period, 445,000 fewer Michigan residents eligible for employer-sponsored health insurance were enrolled in it," said David Morse, vice president for communications at the Robert Wood Johnson Foundation.

"That has enormous implications for worker health and productivity," Morse said. "This is a growing problem, not one that's being mitigated. It needs to be addressed immediately. We need a national solution."

Michigan business leaders discussed the report's key issues during a forum Thursday in Dearborn as part of a weeklong series of events to highlight the increasing number of Americans without health insurance.

Panelists said increasing costs are forcing some employers to raise employee contributions to rates that workers can't afford or to drop insurance altogether.

"The health-care financing system is broken," said Kevin Seitz, president and CEO of **Blue Care Network of Michigan**. "Most business entities are stretched to the point where they can't afford to provide what they have in the past. So we wait for the big change, the crisis that will eventually come."

For information about the study or Cover the Uninsured Week, visit www.covertheuninsuredweek.org or www.rwjf.org.

Contact **KATIE MERX** at 313-222-8762 or kmerx@freepress.com. Tom Walsh contributed to this report.

Top 10 gainers

States with the biggest increases in average per-employee health insurance premiums, 1998-2003:

	1998*	2003	Percent change
Tennessee	\$2,249	\$3,597	59.9%
Georgia	\$2,316	\$3,624	56.5
Florida	\$2,344	\$3,592	53.2
Kentucky	\$2,246	\$3,437	53.0
Delaware	\$2,525	\$3,854	52.6
Minnesota	\$2,421	\$3,679	52.0
North Carolina	\$2,248	\$3,411	51.7
Idaho	\$2,227	\$3,331	49.6
Iowa	\$2,191	\$3,270	49.2
Michigan	\$2,460	\$3,671	49.2

*Adjusted for inflation

Source: Agency for Healthcare Research and Quality

The Detroit News

Michigan health premiums soar

Insurance fees for workers have risen 49 percent since 1998, study shows; employers struggle with high cost.

Sharon Terlep / The Detroit News

According to a new report, Michigan's workers saw their health insurance premiums increase by 50 percent between 1998 and 2003, the seventh highest jump in the nation. Have your health insurance rates gone up more than you expected?

Michigan workers are saddled with some of the nation's fastest-rising health insurance premiums, paying rates that jumped 49 percent in five years, according to a study released Thursday.

The report is the first detailed look at health coverage costs in the state and the effect they're having on workers' decisions to enroll in employee-sponsored health care. In Michigan and throughout the country, rising costs are prompting more people to go without coverage even when it's offered by their employer, the study found.

The cost of coverage offered by employers is going up as health care gets more expensive and employers are passing the added costs on to workers.

"If you're making \$20,000 a year and your health premium is \$3,000, you're probably going to say, 'I'll take my chances,' " said Charles Roehrig, vice president of the Health Solutions Division at Ann Arbor-based Altarum Institute.

Workers in Michigan's private sector paid an average annual premium of \$3,671 in 2003, up 49 percent, or \$1,211, from 1998, according to the report by the Robert Wood Johnson Foundation, a New Jersey-based policy research center. Nationally, the increase was 42 percent, from \$2,454 to \$3,481.

The rise comes despite the fact that workers are actually paying a smaller portion of the actual cost of their coverage. In Michigan, workers on average paid 14.7 percent of their coverage costs in 2003, down from 15.9 percent in 1998.

"We sweat over what is a fair share for our employees to pay," said Janet Roncelli, president of Bermar Associates Inc., a plastic injection molding company in Troy. She said her company has worked to cut its health care bill by increasing co-pays, shopping around for cheaper policies and encouraging healthy employee behavior. All of those efforts, however, are not enough to keep costs down, she said.

Employers must offer insurance, she said, because coverage "is the single most important factor in attracting and retaining employees."

The majority of Americans -- more than 60 percent -- receive health coverage through work, making the private sector a key player in the debate to control health costs while providing affordable coverage to more people. About 15 percent of people are covered by Medicare or Medicaid, and another 5 percent purchase their own private policy. The remaining 18 percent are uninsured.

A number of factors are contributing to the relatively steep increase in health care premiums across the state, experts say. The automobile industry has traditionally offered top-notch benefits at little cost to workers, so in many ways Michigan workers have more to lose when companies such as GM and Ford shift costs to employees. The state's lagging economy and restructuring efforts in high-profile industries such as manufacturing are prompting employers to cut costs. And the relatively poor health of state residents is driving costs higher.

"If it keeps rising, we're going to have to do something," said Mark Maitra, who owns four Arby's restaurants in Oakland and Wayne counties. The rates he pays to insure his workers have risen 150 percent since 1998, he said. For basic coverage, employees pay no premium. If they want more coverage, however, they must pay, he said.

"We have to be market competitive, and this is affecting our profitability," he said.

As rates rise, fewer workers are opting to buy insurance. In Michigan, the number of employees who opt not to receive coverage offered by their employer rose to 18 percent in 2003 from 13 percent in 1998.

The premium is the amount workers pay for coverage and, in many cases, is in addition to co-payments and deductibles.

Michigan's increase was the tenth highest in the nation, and the state is the only one in the Midwest other than Iowa in the top 10. The steepest rises tended to be in southern states, such as Tennessee, Georgia and Florida.

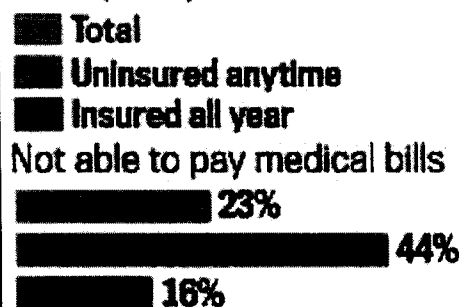
Altarum's Roerhig said increasing premiums are creating a growing population of people who are underinsured, meaning they have some coverage but that it is either not affordable or doesn't cover necessary services.

Nationwide, workers today spend more than 11 percent of their income on health coverage, up from 3 percent in the late 1990s, he said.

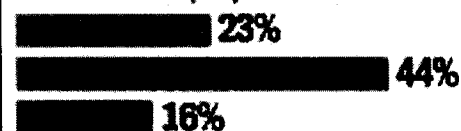
"The problem," he said, "is getting worse."

Trouble paying medical bills

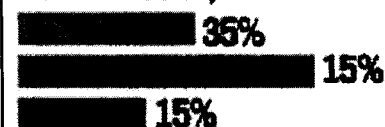
Percent of adults ages 19 to 64 in 2003 who had the following problems in the past year:



Not able to pay medical bills



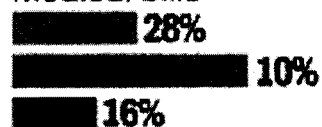
Contacted by collection agency



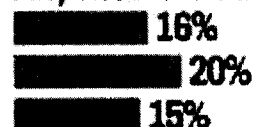
Note: A phone survey of 4,052 Americans

Source: Commonwealth Fund

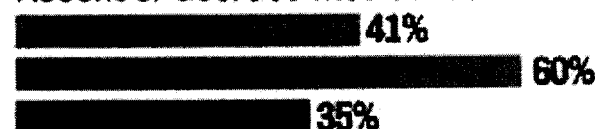
Had to change way of life to pay medical bills



Any medical bill and/or debt problem



Recent or accrued medical debt



The Detroit News

It's time for national health insurance

U.S. needs to fix crisis and stop sticking millions with medical debt

Ron Gettelfinger

Labor Voices

Labor Voices columns are written for The News on a rotating basis by United Auto Workers President Ron Gettelfinger, Teamster President James Hoffa, Michigan AFL-CIO President Mark Gaffney and Michigan Education Association President Iris Salters. The News hopes to provide a forum for discussing workplace issues that are critical to a large segment of Michigan's population, whether or not they are union members. Look for Labor Voices every Friday in **The Detroit News**.

You've probably noticed more media attention than usual focused on America's dysfunctional health care system during the past several days thanks to "Cover the Uninsured Week," an initiative of the Robert Wood Johnson Foundation.

"Cover the Uninsured Week" is a uniquely American event -- uniquely American because the United States is the only advanced industrialized nation without some form of universal health care coverage.

Why? The conventional wisdom, of course, is that we can't afford it. Well, the conventional wisdom is just plain wrong. It's not that we don't have the money; it's that we're spending our health care dollars inefficiently and foolishly.

America's foolish spending

With its patchwork health care system, the United States spends a higher proportion of its gross domestic product or total economic output and far more per capita on health care every year than any other industrialized nation. In fact, America's health care bill of about \$5,267 per capita is nearly two and a half times the industrialized world's median of \$2,193.

Yet for all that spending, some 46 million Americans -- including more than 8 million children -- don't have any health insurance and an estimated 16 million more are underinsured.

What's more, despite having the best doctors, nurses and other health care professionals in the world, the United States ranks near the bottom among industrialized nations on life expectancy, infant mortality and virtually every other measure. In fact, the infant mortality rate in our nation's capital is more than double the infant mortality rate in Beijing.

Most of us would agree that nothing is more valuable than our family's health. But the harsh reality is that a large and growing number of lower- and middle-income working Americans are forgoing preventive care and putting off medical treatment because they can't pay for both health care and basic necessities like food, housing, gas and electricity.

Medical debt grows

A newly released study by the Commonwealth Fund found that slightly more than one in five of all working-age Americans, both uninsured and insured, have medical debt they are paying off over time. Nearly one in four uninsured adults say they had used up all their savings to pay medical bills.

The Commonwealth Fund survey also found that nearly three in five uninsured adults with chronic conditions like asthma or diabetes didn't fill a prescription or skipped taking their medications because they couldn't afford them. And, not surprisingly, uninsured Americans are far less likely than their insured counterparts to get mammograms and other cancer screenings, dental exams, blood pressure and cholesterol tests, and other preventive care.

The situation is nearly as bad among underinsured Americans.

Treatments get delayed

A recent survey by the Reader's Digest found that among underinsured middle-class Americans (defined as having household income of \$25,000-\$100,000, health insurance and deducted medical expenses on their 2004 federal income tax return), about half say they've put off or refused medical treatment for a serious condition, or delayed taking or renewing prescription drugs. Nearly one-fourth say they're behind on medical bills -- and nearly half have used credit cards to meet health care costs.

How much worse can it get? Some health care experts predict that if insurance premium increases continue to outpace growth in wages and income, 56 million Americans -- including 27.8 percent of working Americans -- will be uninsured by 2013, just seven years from now. And those of us fortunate enough to have coverage (and jobs) will be faced with higher premiums, co-pays and deductibles.

There's a better way

But isn't there a better way? Of course.

The UAW has long advocated single-payer national health insurance as the fairest and most cost-efficient way to provide affordable, quality, comprehensive health care to every American regardless of income.

Sound impossible? It shouldn't. We already have more than 40 years experience with a single-payer system in America. It's called Medicare, and it may not be perfect, but it sure works better than the privatized part of our health care system.

Medicare provides model

Medicare spends nearly 98 percent of its funds (our tax dollars) on actual medical care. In contrast, as economist Paul Krugman noted in his recent New York Times column, Aetna, one of America's largest health insurance companies, "spends less than 80 cents of each dollar in health insurance premiums on actually providing medical care."

The rest goes to profits, marketing and administrative costs -- including screening out people likely to have big medical bills. In short, health insurance is one area where a government program has proven not only fairer but more cost-effective than the private sector.

National health insurance made sense when President Harry Truman proposed it in 1948. Today, it may be the only sensible way to fix America's health care crisis.

Ron Gettelfinger is president of the United Auto Workers. Please send letters to The Detroit News, Editorial Page, 615 W. Lafayette, Detroit, MI 48226, (313) 222-6417 or letters@detnews.com.

Oak Park clinic serves the uninsured

Facility is group's 2nd to offer free services

Kim Kozlowski / The Detroit News

OAK PARK -- When Julie McCann lost her job in January, she had just learned of a possible heart blockage and was terrified about losing her health insurance.

The Redford Township woman paid \$312 a month to continue her coverage, but she had to drop it after two months because it was too expensive -- especially without a job.

"I was really worried about what I was going to do without health insurance," said McCann, 43.

Luckily, McCann found a free health clinic that is open one afternoon a week in Oak Park.

It is for uninsured adults who do not qualify for government medical assistance and is the second free clinic opened by the Michigan Association of Physicians from India, which has been operating a free clinic in Taylor since 1998.

Known as the MAPI Charitable Clinic, the Oak Park location adds another much-needed site to address the health care needs of Michigan's adults who are uninsured, estimated by state officials at 1.1 million.

"The need is there all over," said Chandrika Joshi, a gynecologist and president of MAPI.

"Anybody who qualifies should take advantage of this if they need it."

The opening comes as health officials across the country are trying to sign people up for public health insurance plans during the national Cover the Uninsured Week.

Doctors throughout Michigan, concerned about those who do not have health insurance, are participating in various efforts to address the need in free clinics, or simply caring for people in their office for free, according to Dave Fox of the Michigan Medical Society.

"It's incredibly admirable, and it's part of the professionalism of a doctor giving back to the community," Fox said.

The doctors focus on treating people with high blood pressure, diabetes, asthma, arthritis and other common ailments. They do not provide emergency care, immunizations, pregnancy care or mental health care, and they do not treat children because they qualify for government-provided health insurance.

Patients must make appointments to go to the clinic, which is staffed by two dozen local Indian doctors who take turns volunteering at the office of Pramod Raval, one of the doctors on the volunteer roster. Though the clinic has been open for almost a year, the doctors feel the system is running smoothly so they are ready to double their caseload of patients. Currently, they are only seeing about five to six patients every Wednesday.

Novi resident Janet Rogoff hadn't been to a doctor in two years because she works full time in sales but doesn't receive health insurance through her employer. She heard about the free clinic at a health fair that was put on by the Indian doctors. She has since been there three times to cope with a fungus and high cholesterol.

"If this clinic was not here, I wouldn't have taken myself to a doctor because it's so expensive," said Rogoff, 50. "You can't get good health insurance for less than \$400 a month."

Eva Lopatin's husband was laid off from his job and they don't have health insurance. A friend told her about the free clinic, so she went there to get help with her arthritis and high blood pressure.

"This has helped so much," said Lopatin of Farmington Hills.

The doctors also host three health fairs throughout the region to screen people for diabetes, high blood pressure, prostate cancer and osteoporosis.

You can reach Kim Kozlowski at (313) 222-2024 or kkozlowski@detnews.com.

Mich. seniors face deadline on Medicare

May 5, 2006

BY RUBY L. BAILEY

FREE PRESS WASHINGTON STAFF

Anita MacSorley has helped dozens of older Michiganders beat a May 15 deadline to choose a plan under the new Medicare prescription drug benefit, saving them hundreds, occasionally thousands, of dollars annually compared with out-of-pocket drug costs.

But MacSorley, a healthy 73, is balking at having to pay a premium herself for coverage she said she doesn't need.

"I'd hate to have to choose and pay for something I'm not using," said MacSorley, as she awaited clients at a recent senior help day at the Area Agency on Aging 1B in Southfield. "And a lot of people I know aren't choosing."

MacSorley is among an estimated 250,000 of the state's 1.5 million eligible residents who hadn't signed up as of last week, according to the Medicare/Medicaid Assistance Program. Before the program began Jan. 1, about 853,000 eligible Michigan seniors lacked coverage.

Nationally, 8 million to 14 million eligible seniors have not signed up.

As the May 15 enrollment deadline nears, some advocates worry that many seniors will miss it. Those who do will face a minimum 7% penalty based on the average national premium cost for 2007, according to the Medicare/Medicaid Assistance Program, based on 1% for each month they started the program late. Sign-up doesn't resume until Nov. 15 for policies that would take effect Jan. 1.

Some people might miss out, not because they can't decide, but because they are unaware of the deadline despite a national advertising campaign. A recent Kaiser Family Foundation poll found that 55% of 577 seniors polled said they realized the deadline is May 15. The poll found that 53% said they knew about the penalty.

The benefit, the most significant change to Medicare since it began in 1965, is available to 42 million Americans. More than 23 million have signed up for the federally subsidized, private insurance policies.

Typically, plans cover the first \$250 of a beneficiary's yearly prescription costs, and 75% of the next \$2,000 in drug costs. The beneficiary pays the next \$2,850 in drug expenses -- until the yearly prescription cost reaches \$5,100 -- with the beneficiary responsible for 5% of drug costs thereafter.

The program got off to a shaky start last fall as many critics branded it too confusing and costly. Since then, more seniors are saying they like it because they're saving money.

A recent study by AARP found that 25% were saving a lot of money and two-thirds said they were saving at least some money. AARP offers a prescription drug plan under the new benefit.

A Kaiser poll taken in March for the Medicare RX Education Network found that 23% of 201 seniors said they did not save money. Roughly 17% of those in the AARP poll said they weren't saving money or their coverage was worse than before they signed up for the benefit.

The early days of the program were marked with problems such as a massive computer crash that left thousands of low-income people unable to fill prescriptions in January. Those issues have mostly been resolved, according to the Centers for Medicaid & Medicare Services, or CMS, which administers Medicaid and Medicare.

Democratic Michigan U.S. Sens. Carl Levin and Debbie Stabenow were among 48 to petition Sen. Majority Leader Bill Frist, R-Tenn., asking him to consider legislation to extend the deadline and delay penalties. Stabenow said the program's implementation was a disaster.

The Congressional Budget Office estimates the deadline could prevent up to 1 million seniors from enrolling nationwide. In April, the Bush administration prohibited insurers from suddenly changing covered drugs, a main point of contention for seniors, who picked plans based on which drugs were covered.

They are allowed to change plans just once a year. Under new rules, insurers cannot change a beneficiary's coverage until the new enrollment period.

Before the change, insurers could change covered drugs at any time and seniors were unable to switch plans.

And CMS has quadrupled its system server capacity since November.

Its call center, where operators can enroll seniors in a plan, is to have 6,000 operators until the enrollment ends. Advocates are concerned that seniors waiting until the last minute could overwhelm the computer system.

"We'll have everything together we need to have together to make it work," said CMS spokesman Peter Ashkenaz.

Advocates report more frustrated, frightened seniors showing up at area sign-up events.

"It's got to be simplified somehow," volunteer Martin Barr, 80, of West Bloomfield said of the enrollment process. Michigan seniors can choose among 41 drug plans.

There have been some reports of seniors unwittingly losing coverage by not following federal guidelines when trying to change plans.

Some reportedly opted out of a plan before trying to enroll in another. But the system counts the so-called disenrollment as the one allowable change to a plan, and thus prevented seniors from enrolling in another plan, according to the Area Agency on Aging.

"This whole plan is screwy," said Nancy Haapaniemi of Farmington, 82, as she waited for an appointment with a counselor. "There are too many ifs, ands or buts."

Haapaniemi said she pays \$900 to \$1,000 monthly for her prescriptions for a chronic medical condition, heart trouble and pneumonia.

After about an hour with a counselor, she picked a plan that will cost her roughly \$4,000 yearly between premiums and drug costs.

"The whole program is real hard to understand," said Haapaniemi, who said she was shocked to learn how much she would save. "I just hope it works."

Contact **RUBY L. BAILEY** at 202-906-8203 or rbailey@freepress.com.

How to get help

What: The deadline for enrolling for Medicare's new prescription drug coverage is May 15.

Who: People 65 or older qualify. Some people with disabilities may qualify at a younger age.

Impact: Those who miss the deadline will have to wait until the next enrollment period begins Nov. 15. They will be assessed a 1% per month penalty for each month that they were eligible, but not in a plan. The minimum additional charge will be for seven months or 7% of next year's average national monthly premium. That figure is to be announced in August. This year's average was \$32.20 per month.

Example: If next year's average monthly premium is \$40 per month, the premium for someone who missed the deadline would be a minimum of \$42.80. That extra \$2.80 would mean about \$33.60 more next year and every year the person is in the program.

Other tips: Here are some suggestions on choosing a plan:

Know your current coverage, if any.

Get a list of your medications and nearest pharmacies.

Check the Medicare Web site -- www.medicare.gov -- to compare plans that will offer the best coverage.

Need help?

The Michigan Medicare/Medicaid Assistance Program (800-803-7174) can help you sign up over the telephone or tell you about programs in your area where volunteers will help.

The Center for Medicare and Medicaid Services (800-633-4227) will also help seniors enroll by phone.

Source: Center for Medicare and Medicaid Services

Medicare deadline ahead

Seniors must sign up for prescription drug program by May 15 to avoid a penalty

Friday, May 05, 2006

BY LISA CAROLIN

Ann Arbor News Staff Reporter

May 15 is the enrollment deadline for the new federal Medicare Part D program that allows seniors to sign up for supplemental prescription drug coverage.

Eligible seniors who want to participate must do so by May 15 to avoid a 1 percent per month premium penalty to sign up later. Under the program, seniors will pay a monthly premium to private companies for coverage, with premiums in Michigan ranging from \$25-\$85. Michigan seniors can choose among 41 plans from 18 different companies.

The Area Agency on Aging 1-B offered a free counseling session April 27 at the Fowlerville Senior Center. Workers from Livingston County's Catholic Social Services and from the Area Agency on Aging were there to help seniors determine the plans that would work best for them.

"The cost of the drugs someone needs determines what plan they want to go in," said Patty Flynn from CSS. "If a drug isn't covered, you're going to be charged full price."

Flynn says people with prescription drug coverage through their employer should have received a letter or newsletter stating if the coverage is as good as or the same as Medicare. Brighton Township resident Diana Pihalja, whose husband is still working, got some advice at the counseling session.

"This is traumatic," said Pihalja. "It's been difficult getting anyone to call back. If I had known what to expect, I would have come better prepared."

Carrie Nicholson, from the Area Agency on Aging, asked for a list of all the prescription drugs Fowlerville resident Michael Kelly is getting.

"I need to see all of your prescriptions in order for us to match you with the best plan," Nicholson explained to him. "It's the choices that people are confused about, and for many people talking one-on-one helps clarify things."

"There are so many different plans with different tiers for drugs and no explanation," said Kelly. Nicholson advises that people who take a lot of medications may have to pay higher premiums.

"Some people have told me that they're not signing up because they only take a few medications," said Flynn. "I say consider it like an insurance plan. If you had a catastrophic illness all of a sudden and needed a lot of medications, you'd have the coverage."

Mark Swanson, director of the Howell Senior Center, offered these tips:

Under basic plans, seniors pay the first \$250 of prescription drug costs; 25 percent from \$250 to \$2,250; 100 percent from \$2,251 to \$5,100 (commonly called the "doughnut" and 5 percent for costs above \$5,100. Companies also offer programs with better coverage for a higher premium, if seniors want to upgrade.

When shopping, be sure to ask: What drugs are covered; the monthly premiums; how much are co-pays; participating pharmacies and whether prescriptions can be filled in other states, especially if you travel or live elsewhere during the year.

Those who are dual-enrolled - on both Medicare and Medicaid have already been put into a program if they did not pick one.

Veterans under the TRICARE plan will see no changes and do not need to sign up. "If you're a veteran (in that program), stay put," Swanson said.

No drugs purchased out of the country, including in Canada, will be covered by this plan or go against the plan's deductibles.

The next enrollment period goes from Nov. 15-Dec. 30, 2006 for coverage beginning Jan. 1, 2007.

Lisa Carolin can be reached at lcarolin@livingstoncommunitynews.com or at 810-844-2010.

Deputy: Unger's behavior 'odd'

Sheriff who reported to resort testifies suspect never asked about wife, just wanted to leave.

Mike Martindale / The Detroit News

BEULAH -- When Benzie County Sheriff's Deputy Troy Packard arrived at the Inn of Watervale near Arcadia on the morning of Oct. 25, 2003, what he saw didn't add up.

Florence Unger's body was floating facedown in less than a foot of water near the resort's boathouse. A blood-spattered blue comforter dangled from a boat hoist. The deck's wooden railing was cracked and broken. Shattered glass and candles were scattered across the concrete apron around the boathouse, near a large pool of blood.

Packard also saw the dead woman's husband, Mark Unger, sitting in a lawn chair up on the hill, wrapped in a blanket, crying over the loss of the lady in the lake.

As Packard investigated the death, he said, Unger's demeanor became erratic.

"It was odd, his behavior," Packard told a Benzie County Circuit Court jury on Thursday. "He would be talking normally and then take another call and erupt into crying and then put someone on call waiting and begin talking normally again.

"He kept saying he wanted to leave and here's Florence laying facedown in the water. He never asked what happened to her. All he wanted to do was leave."

Mark Unger, 45, of Huntington Woods is charged with first-degree murder in the death of his 37-year-old wife.

Investigators believe Florence Unger was either pushed or fell off the 12-foot-high deck during an argument with Unger about their pending divorce and child custody issues. Investigators think Unger then dragged his wife's injured, immobile body a few feet to the lake in an effort to make her death look like an accidental drowning.

Michigan Assistant Attorney General Donna L. Pendergast said she will convince the jury there are too many inconsistencies in Unger's version of events.

Florence Unger's father, Harold Stern, testified that his daughter -- who according to her husband lingered alone outdoors the night of her death -- had a lifelong fear of the dark.

"As a child and after 30 years, (she) had still not outgrown it," said Stern, the first witness called by Pendergast. He said both Stern and his wife were suspicious when they received a call from Unger the morning of the death.

"First thing he said was 'I've got some bad news about Florence,' " said Stern. " My wife said 'I want to know where my daughter is by God you've killed my daughter.'"

Linn Duncan, one of the owners of Watervale, said he had repeatedly leaned against the railing the day before the incident, lowering 20 pieces of wooden furniture by rope, and found the railing "in great shape." Duncan testified he and his wife found Florence's body after receiving a 7:38 a.m. phone call from a sobbing Unger, asking for their help in searching for her.

When Duncan met up with Unger on the grounds and told him "Mark, she's in the water and you're not going to like it," Unger "went ballistic" and ran off toward the boathouse 200 feet away, tore off his coat and jumped into the water next to her floating body.

Duncan said he never told Unger where his wife's body was found.

Packard said Unger's 1999 Ford Explorer was packed up and Unger was apparently preparing to leave the resort before deputies ever arrived.

A wet pair of sweat pants, socks and shoes were all found wadded up on the Explorer's floor.

You can reach Mike Martindale at (248) 647-7226 or mmartindale@detnews.com.

05/05/2006

Victim's father testifies in murder trial

By John Flesher

The Associated Press

Via Traverse City Record-Eagle

BEULAH — Florence Unger's mother blurted, "You've killed my daughter," when Mark Unger telephoned to break the news of her death at a northern Michigan resort, the victim's father testified Thursday.

Harold Stern was the first witness in Mark Unger's trial on a first-degree murder charge in Benzie County Circuit Court. His testimony suggested that Stern and his wife, Clare, were immediately suspicious of their son-in-law after learning of the tragedy.

Stern, a semi-retired attorney, is from Huntington Woods, a Detroit suburb.

Under questioning by prosecutor Donna Pendergast, Stern said Mark Unger called them the morning of Oct. 25, 2003, and said he had bad news about Florence.

Later that day, they met Unger at the home of the Sterns' son in neighboring Leelanau County. Unger suggested that Florence be cremated, Stern said. That seemed odd because cremation "is contrary to the tenets of the Jewish faith."

Under cross-examination, defense attorney Robert Harrison raised the possibility that Florence wanted her ashes scattered in northern Michigan because she loved the area. Stern labeled the suggestion "malarkey," saying he suspected Unger's real motive was to avoid an autopsy.

County favors \$28M juvenile home request

Friday, May 5, 2006

By Cedric Ricks

Kalamazoo Gazette

cricks@kalamazoogazette.com 388-8557

Kalamazoo County officials are leaning toward asking voters for \$28 million during the Aug. 8 election to build a new 64-bed Kalamazoo County Juvenile Home.

County Administrator Donald Gilmer recommended the option Thursday night during a special meeting of the county Board of Commissioners to discuss a potential tax for the juvenile home. In April, commissioners had discussed requesting a tax increase for both the new juvenile home and for improvements to the Family Court building. That levy would have raised \$32 million, but there were concerns that voters might reject a tax increase for the Family Court.

If Gilmer's \$28 million proposal is approved, the county would levy 0.2613 of a mill in 2007, costing the average homeowner nearly \$15 a year.

The new juvenile home would be constructed next to the current home on Gull Road. The current home would be demolished. Officials say a small piece of property nearby would be acquired so children at the juvenile home would have a recreation area.

The board is expected to approve ballot language for the Aug. 8 election at its May 16 meeting. Commissioners spent Thursday debating whether renovations to the county's Family Court operations, also on Gull Road and next to the juvenile home, should be part of any tax request.

"I agree with administration's recommendation that we should separate these two issues,"

County Commissioner John Taylor said.

Gilmer said seeking a tax increase only for the juvenile home may be best, considering voters overwhelmingly rejected a millage request in August 2005 that asked for a new juvenile home, an expanded jail and rehabilitation programs for adult and juvenile offenders.

"They want to spend no more than what is necessary to solve the replacement of the juvenile home," Gilmer said.

Gilmer said county commissioners could decide to use money set aside in the county's justice-facilities fund to provide additional office space for caseworkers and probation officers at the juvenile home and to make improvements at the Family Court building. Finance Director Bill Dundon said the county will have \$4.25 million in the justice-facilities fund by the end of the year and more than \$9 million by 2008 because of cuts in spending county officials say are planned.